

(Washington, DC)— Congresswoman Gwen Moore (D-Wisc.) commented on the introduction of H.R. 3962, the Affordable Health Care for America Act, which was unveiled today. The new health insurance reform bill blends together the changes made by the three committees with jurisdiction over the legislation. The full text of the bill is available here: [http://docs.house.gov/rules/health/111\\_ahcaa.pdf](http://docs.house.gov/rules/health/111_ahcaa.pdf)

“Today the decades-long fight for affordable and quality health care for all Americans has reached a historic milestone, with the introduction of a bill that will make its way to the House floor for a full vote in the coming weeks,” Congresswoman Moore said. “I am proud to be a part of this historic effort, and I am proud of the resoluteness of the Democratic caucus.

“We have stuck to the important cause of quality and affordable health care for all Americans. As a Congress, we have engaged our constituents on the topic of health insurance reform through thousands of events, meetings and forums. We have educated the American people, broke through a barrage of misinformation and shed the light of day on scare tactics. And we are closer than ever before to passing monumental legislation that our citizens have demanded and that ensures quality and affordable health care for all Americans.”

The first version of America’s Affordable Health Choices Act, H.R. 3200, was introduced on July 14, 2009 and subsequently amended by the House Energy and Commerce Committee, the House Ways and Means Committee, and the House Committee on Education and Labor. This new version, the Affordable Health Care for America Act, H.R. 3962, blends together the committees’ amended versions of the bill.

The new legislation expands health insurance coverage to 36 million Americans, which helps guarantee that 96 percent of Americans will be covered. The bill also includes a public option that would be offered in an exchange alongside private insurers, which will inject badly needed competition and choices for consumers into the health insurance market. In addition, it meets two of the fundamental criteria that President Obama spelled out at the outset of this legislative process: it is fully paid for and it will reduce the deficit in the long term.

The new legislation makes some significant changes to the original legislation. According to the Congressional Budget Office, the revised bill would reduce the deficit by \$30 billion over the first 10 years of its enactment. The original bill reduced the deficit by \$6 billion over the first 10

years. The revised bill also continues to reduce the deficit over the second 10 years.

The revised bill moves forward the date by which the Medicare Part D donut hole would be reduced by \$500 and a 50% discount on brand-name drugs would be instituted. These provisions would take effect January 1, 2010.

To fill the gap in insurance coverage before the bill's Health Insurance Exchange becomes available, the revised bill immediately creates an insurance program with financial assistance for those who have been uninsured for several months or denied a policy because of preexisting conditions.

It also requires health plans to allow young people through their 26th year to remain on their parents' policy, at their parents' choice.

The revised bill exempts a greater number of small businesses from the "employer mandate," which would require employers to provide health coverage to their employees. About 86% of America's businesses would be exempt due to these revisions. Specifically, the bill exempts firms with payrolls up to \$500,000 (as opposed to \$250,000 in the original legislation) from the mandate. It provides only a graduated penalty to firms with payrolls between \$500,000 and \$750,000 that do not offer coverage.

Also this week, Senate majority leader Harry Reid signaled that the final Senate health insurance reform bill, which has not yet been introduced, will include a public option with an opt-out for states.

"This is absolutely forward progress from where we were just a few weeks ago, when we believed the Senate would rule out the public option altogether," Congresswoman Moore said. "It's important that when the House and Senate come to conference on the bill, the public option comes too. It is the best mechanism I have seen thus far that I believe is capable of slowing the upward trajectory of health care costs."

"The House of Representatives is fully committed to getting this bill passed. Members have

been told that we may be working in Washington right up until Christmas so that we can get it done.”

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